

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VAH	70391	9/88
O.I.P.E. CLASSIFIER	SW	32	10/88
FORMALITY REVIEW		64477	10-12-89

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
1	2/86
2	4/86
3	6/86
4	8/86
5	10/86
6	12/86
7	2/87
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48	12/93
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50	4/94

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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